



## GRANT APPLICATION for Douglas County CARES Remote Learning & Technology Support Grant

This one-time payment is to provide financial assistance to licensed child care programs to meet the technology and wireless connectivity requirements needed to ensure a quality connection for school-aged children enrolled in hybrid learning because of COVID-19. Examples of acceptable expenses include the installation of additional lines, routers, charging stations, and other technology hardware to meet these needs, as well as upgrades in connectivity services.

### GRANT GUIDELINES

- This application must be must be completed, signed, and emailed/postmarked by November 20, 2020, for consideration. An incomplete application may be denied or delayed in processing.
- Two forms, the signed application, and completed W-9 are required. An incomplete set of forms may cause an application to be denied or delayed.
- Copies of receipts of purchases for technology equipment and new or increased connectivity services must be included in the application. Failure to provide receipts may cause an application to be denied or delayed.
- The maximum award for technology equipment is \$200.
- The maximum award for connectivity services is \$50 per month for 5 months (August – December 2020).

### CRITERION for ELIGIBILITY

- Child care centers, school-age programs, and family/group child care home programs must be licensed by and in good standing with the Kansas Department of Health and Environment (KDHE).
- Child care centers, school-age programs, and family/group child care home programs must be currently open and providing care to school-aged children.

### DIRECTIONS

Complete the grant application (including the general program information, and expenses requested for funding), receipts, and a completed W-9 to: [marie@east.ks.childcareaware.org](mailto:marie@east.ks.childcareaware.org)

Program Name	
Applicant Name	
KDHE License Number	
Mailing address	
City, State, Zip Code	
Phone Number	
Email	
Total number of school-aged children enrolled.	



## Statement of Funding Purpose and Required Documentation

**Part 1:** Describe below the expenses that your program to date has incurred from August 1, 2020, to provide the technology requirements needed to ensure a quality connection for school-aged children enrolled in hybrid learning. Examples of acceptable expenses include the purchase and installation of additional lines, routers, charging stations, and other technology hardware to meet these needs. Be sure to reference each receipt that represents each expense, and attached copies of all receipts.

**Part 2:** If you needed to upgrade a wireless plan to improve connectivity for hybrid learning, include the cost of the monthly fee prior to the upgrade and the cost after the upgrade. Be sure to include documentation from your service provider demonstrating the increased fees.

Has your organization received any CARES Act funding support from any federal, state, county, or private sources to specifically meet the remote learning needs of school-age children for the 2020-2021 school year? YES NO

- If YES: **Please explain the funding source, amount, and purpose.**

## Program Consent to Share Information:

In accepting funds awarded through the Douglas County CARES Act, I am authorizing Child Care Aware of Eastern Kansas to collect and share information on our program with representatives from Douglas County and the State of Kansas for the purpose of supporting child care program needs as a result of the COVID-19 outbreak. It is further agreed that all identifying information shared among agencies will be held as confidential unless otherwise required by law.

**ATTESTATION STATEMENT** I certify that I have read and understand the application and that the answers given by me to the foregoing questions are complete and true to the best of my knowledge and belief. I further agree that if my grant application is accepted, I will comply with all grant guidelines. I agree to contact Child Care Aware® of Eastern Kansas within 72 hours if my organization is awarded this grant AND receives notice of an award for other CARES Act funding our program has applied for intended for this same purpose.

Program Name	
Name and Title of Authorized Representative (print)	
Authorized Signature	
Date	